STATEMENT OF

RECEIVED 7

FORM 1	ORGANIZATION				. '	FEC MAIL CENTER Office Use Only
			····			Office Use Only
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple:If typing, type r the lines.	12FE4M5	
Curt Claws	on - T	he Outsider f	or Co	ngress Com	mittee	
ADDRESS (number and street)		8951 Bonita Beach Road				
(Check if address is changed)		Suite 525 - V 2014				
		Bonita Spring	gş		FL	34135
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	IL ADDRES	SS (Please provide only one	e-mail ad	dress)		
		admin@curt	claws	son:com , ,	1 1 1 1 1	1 1 1 1 1 1 1 1 1 1
(Check if address is changed)						
COMMITTEES WED DAGE ADDDESS (HDL)						
COMMITTEE'S WEB PAGE ADDRESS (URL) WWW.CURTC AWSON.COM						
(Check if is change						
•						
2. DATE 01" ' 13° ' 2014.						
3. FEC IDENTIFICATION NUMBER						
4. IS THIS STATE	MENT X	NEW (N) OR		AMENDED (A)		·
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Type or Print Name of Treasurer Mark Brebberman						
Signature of Treasure	er <u>N</u>	rail A Bret	hem	<u>. </u>	Date 01	13° (2014)
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use				For further information of Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)